



NEW HAMPSHIRE
DHHS
DEPARTMENT OF
HEALTH & HUMAN SERVICES

Service Coordination Supervisor Meeting

5.5.2023

Readiness Training Schedule

BDS is committed to providing support to service coordinators in preparation for 7/1.

BDS Provider Readiness Meetings

- **BDS Monthly Connection with Service Coordination and Intake Departments**

- Every 2nd and 4th Wednesday of the month from 2-3:30pm.

https://teams.microsoft.com/l/meetup-join/19%3ameeting_YmVmNDM1MDMtNDhhMS00MDE4LWEwM2MtMTJiNDdlZWUzZjQ4%40thread.v2/0?context=%7b%22Tid%22%3a%22992dea9-1c4c-42c8-a310-5088af55ba74%22%2c%22Oid%22%3a%22c3986336-a59e-4f47-aa37-cd2e72c8db70%22%7d

- **BDS Bi-Weekly Provider Readiness Open Office Hours**

- Every other Tuesday from 11-12pm.

<https://nh-dhhs.zoom.us/j/85809901209?pwd=bnEyM0FrdzZXZlZWVXOWF4b0tPanRpQT09>
Meeting ID: 858 0990 1209 Passcode: 201101

- **BDS Monthly Provider Meeting**

- Every 4th Wednesday of the month from 10-11:30am.

https://teams.microsoft.com/l/meetup-join/19%3ameeting_ZWZjYTBjMjUtMzg2Yi00MDYxLWEyYWYtZDFkYmU1NTk3YTYy%40thread.v2/0?context=%7b%22Tid%22%3a%22992dea9-1c4c-42c8-a310-5088af55ba74%22%2c%22Oid%22%3a%227adcb656-a0c6-49b6-992c-55d9d43565e7%22%7d

- **BDS Weekly Meeting with Service Coordination Supervisors**

- Every Friday from 10-11:30am starting on May 5th.

Agenda

1. BDS Resources for Service Coordinators
2. Waiver Service Definitions and Limits
3. Individual Service Agreement Requirements
4. Question and Answer

BDS Resources for Service Coordinators

BDS Readiness Training Series

- <https://www.dhhs.nh.gov/programs-services/disability-care/developmental-services/bds-systems-work-stakeholder-engagement>

Service Coordination Function List

- <https://www.dhhs.nh.gov/sites/g/files/ehbemt476/files/documents2/scfunctionlist.pdf>

Passthrough Services Guidance

- <https://www.dhhs.nh.gov/sites/g/files/ehbemt476/files/documents2/pass-through-memorandum.pdf>

Provider Readiness FAQ

- <https://www.dhhs.nh.gov/sites/g/files/ehbemt476/files/documents2/bds-provider-readiness-faqs-april.pdf>

Home and Community Based Services Waivers

- <https://www.dhhs.nh.gov/programs-services/disability-care/developmental-services/home-and-community-based-services-waivers>

Waiver Service Definitions and Limits



ABD/DD Waiver Services (Current)

Waiver Services

Day Habilitation/Community Participation

Residential Habilitation

Respite

Case Management/Service Coordination

Supported Employment

Assistive Technology *

Community Integration Services

Community Support Services

Crisis Response Services

Environmental and Vehicle Modification Services*

Individual Goods and Services

Non-Medical Transportation*

Personal Emergency Response Services*

Specialty Services *

Wellness Coaching

Removable Prosthodontic Services

Non-Medical Transportation

Transportation services are designed specifically to improve the individual's and the caregiver's ability to access community activities within their own community in response to needs identified through the individual's service agreement.

Services can include, but are not limited to:

- Transport for safe movement from one place to another;
- Travel training such as supporting the individual and family in learning how to access and use informal and public transport for independence and community integration;
- Transportation service provided by different modalities, including; public and community transportation, taxi services, transportation specific to prepaid transportation cards, mileage reimbursement, volunteer transportation, and non-traditional transportation providers, and
- Prepaid transportation vouchers and cards.
- Parking and toll fees.

Non-Medical Transportation

There is a \$5,000 annual service limit. There is a \$10,000 annual service limit for specialized transportation including wheelchair van/lift and/or a van that allows the individual to “not be within arm’s reach” of the driver for safety reasons. The BDS Administrator reserves the right to approve requests that exceed the cap on a case by case basis.

Coverage may be permitted when non-medical transportation is not otherwise available through a service in the Waiver or the State Plan. Payment under the Waiver is limited to the costs of non-medical transportation needed to access a Waiver service included in the participant’s service plan or access to other activities and resources identified in the service plan.

The following are specifically excluded:

- Adaptations or improvements to the vehicle that are of general utility, and are not of direct medical or remedial benefit to the individual;
- Purchase or lease of a vehicle; and
- Regularly scheduled upkeep and maintenance of a vehicle except upkeep and maintenance of the modifications.

Personal Emergency Response Services (PERS)

Smart technology that may include various types of devices such as electronic devices that enable participants at risk of institutionalization to summon help in an emergency.

- Covered devices may include wearable or portable devices that allow for safe mobility, response systems that are connected to the participant's telephone and programmed to signal a response center when activated, staffed and monitored response systems that operate 24 hours/day, seven days/week and any device that informs of elopement such as wandering awareness alerts.
- Other covered items may include seatbelt release covers, ID bracelets, GPS devices, monthly expenses that are affiliated with maintenance contracts and/or agreements to maintain the operations of the device/item
- Various devices can be an option to consider as a part of a multifaceted safety plan, specific to a participant's unique needs.
- **There is an annual service limit of \$2,000. An individual may exceed this service limit cap with prior authorization approval from BDS.**

Assistive Technology

This service covers assistive technology and any related assistive technology services.

- Assistive technology means an item, piece of equipment, certification and training of a service animal, or product system, whether acquired commercially, modified or customized, that is used to increase, maintain or improve functional capabilities of participants. The Americans with Disabilities Act definition of a service animal is used.
- Assistive Technology Services means a service that directs/assists an individual in the selection, acquisition or use of an assistive technology device.
- The ISA must specify the item, the name of the healthcare practitioner recommending the item, an evaluation or assessment regarding the appropriateness of the item and a goal related to the use of the item, the anticipated environment that the item will be used, Current modifications to item/product and anticipated future modifications and anticipated cost.
- **There is a service limit of \$10,000 over the course of a five-year period. An individual may be able to exceed this cap on a case by case basis with the prior approval of BDS.**

Assistive Technology

Assistive technology includes:

- The evaluation of the assistive technology needs of an individual including a functional evaluation of the impact of the provision of appropriate assistive technology and appropriate services to the individual in their customary environment;
- Services consisting of purchasing, leasing or otherwise providing for the acquisition of assistive technology/devices.
- Services consisting of selecting, designing, fitting, customizing, adapting, applying, maintaining, repairing or replacing assistive technology devices such as therapies, interventions, or services associated with other services in the service plan.
- Coordination and use of necessary therapies, interventions or services associated with other services in the service plan.
- Training or technical assistance for the individual or where appropriate, their family members, guardians, advocates or authorized representatives;

Assistive Technology

Assistive technology includes:

- Training or technical assistance for professionals or other individuals who provide services to, employ or are otherwise substantially involved in the major life functions of the individual.
- Devices, controls, or appliances, specified in the individual service agreement that enable the individual to increase their ability to perform activities of daily living, and/or perceive, control, or communicate with the environment in which they live will be covered.
- Adaptive equipment may only include items of durable and non-durable medical equipment necessary to address the individual's functional limitations and specified in the plan of care.
- Adaptive equipment may be covered so long as it is necessary to address the individual's functional limitations and is not to be used for recreational purposes.
- May include performance of assessments to identify type of equipment needed by the participant.

Environmental and Vehicle Modifications

Physical adaptations to the private residence of the participant or vehicle that is the Waiver participant's primary means of transportation, required by the individual's service plan, that are necessary to ensure the health, welfare and safety of the individual, or which enable the individual to function with greater independence in the home and community, and without which, the individual would require institutionalization.

- Adaptations may include the installation of ramps and grab-bars, widening of doorways, modification of bathroom facilities, or installation of specialized electric and plumbing systems, which are necessary to accommodate the medical equipment and supplies, which are necessary for the welfare of the individual.
- All modifications will be provided in accordance with applicable State or local building codes

Environmental and Vehicle Modifications

For individuals with unsafe wandering and running behaviors, outdoor fencing may be provided under this Waiver. Waiver funds allocated toward the cost of such a fence shall not exceed \$2,500 which can provide approximately 3,500 square feet of a safe play area. Exceptions to this service limitation may be made on a case-by-case basis.

- Excluded are those adaptations or improvements to the home, which are of general utility, and are not of direct medical or remedial benefit to the individual, such as carpeting, roof repair, central air conditioning, etc.
- Adaptations that add to the total square footage of the home are excluded from this benefit except when necessary to complete an adaptation (e.g., in order to improve entrance/egress to a residence or to configure a bathroom to accommodate a wheelchair).

Specialty Services

Specialty Services are intended for recipients whose needs in the areas of medical, behavioral, therapeutic, health and personal well-being require services which are specialized pertaining to unique conditions and aspects of developmental disabilities.

- Specialty Services are utilized to provide assessments and consultations and are used to contribute to the design, development and provision of services, training support staff to provide appropriate supports as well as the evaluation of service outcomes and transportation if applicable.
- Any items provided under this category must be based on an assessed need by a qualified provider and cannot be available as a benefit under the NH State Medicaid Plan.

Services

Service	Remote*	Acute Care*	Cap
Non- Medical Transportation	No	No	\$5,000 Per Year (*\$10,00 for individuals that require specialized transportation)
Personal Emergency Response Services (PERS)	No	Yes	\$2,000 Per Year
Assistive Technology	Yes	Yes	\$10,000 Over 5 years
Environmental and Vehicle Modification	No	Yes	\$2500 Outdoor Fencing
Specialty Services	Yes	Yes	No

*Please refer to the DD and ABD waiver definitions for when remote or acute care services are permitted.

Individual Service Agreement Requirements



Individual Service Agreement Requirements

Service	Requirement
Non- Medical Transportation	Description of Non-Medical Transportation services needs identified.
Personal Emergency Response Services (PERS)	Description of Personal Emergency Response Services services needs identified.
Assistive Technology	Individual service agreement (ISA) will specify the following: 1) The item; 2) The name of the healthcare practitioner recommending the item; 3) An evaluation or assessment regarding the appropriateness of the item; 4) A goal related to the use of the item; 5) The anticipated environment that the item will be used; 6) Current modifications to item/product and anticipated future modifications and anticipated cost.
Environmental and Vehicle Modification	Individual's service plan should describe how the EMOD is necessary to ensure the health, welfare and safety of the individual, or how it will enable the individual to function with greater independence in the home and community, and without which, the individual would require institutionalization.
Specialty Services	Description of specialty services needs identified.

Question and Answer





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Next Meeting

May 12, 2023

10-11:30 AM